



Views on Wellbeing Research, Policy and Practice:

An Interview with Dr. Tayyab Rashid

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Abstract: In this volume of the Middle East Journal of Positive Psychology, we explore the views, hopes, and current research agendas of those working to advance knowledge in the field of positive psychology within the MENA region, or with those who research aspects of culture and religion relevant to it. We uncover their thoughts on the current status of knowledge as well as what opportunities and pitfalls exist. Here, we discuss with Dr. Tayyab Rashid, his thoughts on what is positive clinical psychology.

ملخص: في هذا المجلد من مجلة الشرق الأوسط لعلم النفس الإيجابي، نستكشف وجهات النظر والأمال، والأجندات البحثية الحالية لأولئك الذين يعملون على النهوض بالمعرفة في مجال علم النفس الإيجابي في منطقة الشرق الأوسط، أو الذين يبحثون جوانب الثقافة والدين ذات الصلة به. نكتشف أفكارهم حول الوضع الحالي للمعرفة وكذلك عن الفرص والصعاب الموجودة. هنا، نناقش مع الدكتور طيب راشد، أفكاره حول كيف يبدو علم النفس السريري الإيجابي في المنطقة وغير ذلك من الاعتبارات الثقافية عندما يتعلق الأمر بتطبيقات علم النفس الإيجابي.

Keywords: positive psychology; positive clinical psychology; resilience; strengths; university

About the Author: Dr. Tayyab Rashid is a licensed clinical psychologist at the Health and Wellness Centre and associate faculty member at the University of Toronto Scarborough (Canada). With Dr. Martin Seligman, Dr. Tayyab developed and empirically validated Positive Psychotherapy (PPT) during his clinical training at the Positive Psychology Centre, University of Pennsylvania. Dr. Tayyab has worked for more than 15 years with young adults experiencing complex mental health issues including psychosis, complex trauma, grief, borderline personality disorder and severe depression. His work has been published in academic journals and included in psychiatry and psychotherapy textbooks. He is the current co-chair of Canada's National Campus Mental Health Community of Practice, as well as President of the Clinical Division of International Positive Psychology Association (IPPA). Dr. Tayyab won IPPA's Outstanding Practitioner Award in 2017. See more at www.tayyabrashid.com

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MEJPP: You are the leading expert in positive clinical psychology. Tell us about it.

TR: Positive Clinical Psychology (PCP) (Rashid, 2015a, 2015b, 2016) is a therapeutic endeavour within the contemporary movement of positive psychology that is focused on enhancing



the positives as opposed to traditional Clinical Psychology, which is largely wrapped in dysfunction, deficit and disorder. PCP applies positive psychology theories and evidence-based practices across clinical settings with the specific aim of treating psychological concerns by leveraging strengths, positive emotions and a sense of meaning. On a communal level, PCP provides a platform for clinicians, researchers, academics and students to share knowledge, collaborate and foster healthy dialogue in a way that builds a richer, more nuanced and relevant understanding of incorporating principles of positive psychology in clinical practice.

MEJPP: Why is it such a big development in the field and what new research questions are emerging from it?

TR: It is indeed a big development in the field because psychology generally, and psychotherapy specifically, has rested comfortably on this unchallenged assumption that its function, for the most part, is to undo the wrongs of the past and that the job of a psychotherapist is to uncover the doom and gloom of client's pasts. The psychotherapist brings the doom out in the light of conscious experience with the hope that doing so will automatically create a healthier, happier and more liberated version of the client. I wish the execution was as elegant as the idea. But the truth is that it isn't; removing the negative does little to build the positive. That must be done purposefully, it doesn't appear automatically.

In contrast with the idea of liberating doom and gloom, positive psychology has shown that a better version of one's self can be purposefully cultivated by adding the right combination and amount of ingredients, for example, positive emotions, signature strengths, a sense of purpose and meaning, secure relationships and striving towards goals which build our individual and collective selves. These assumptions are a big development because the field of psychology by the late 1990s was waiting for its next big wave and the past domination of Freudian psychoanalytic and Skinnerian behavioural models reduced individuals to victims of their past or to mere machines who responded to the environment. The cognitive-behavioral model of healing then came into vogue and had its own successes, but, this cognitive lens was unable to encompass the cultural sensitivities of our diverse contemporary world. Positive psychology provided that next development and indeed, provided well. The growth has been tremendous in a short time; a review found 1336 articles specifically related to positive psychology were published in peer reviewed journals between 1999 and 2013 alone (Donaldson, Dollwet, & Rao, 2015), with a further 53 in the MENA/GCC region (Rao, Donaldson, & Doiron, (2015). More than 750 of these articles included empirical tests of positive psychology theories, principles, and interventions, which served to irreversibly change the field of psychology where people are seen to have potential, despite their past experiences or negative points.

The developments that have resulted from this change in philosophy are exciting. For example, by 2020, the World Health Organization (2002) expects that chronic diseases (e.g., cardiovascular disease, diabetes, asthma, arthritis, and cancer) will account for almost three-quarters of all deaths worldwide. Increasingly, positive psychology constructs and interventions are being applied in the health field, aptly named positive health, and are focusing on how to build health assets like cardiovascular fitness, a sense of hardiness, and psychosocial supports and



achieve better and more robust states of (real) health as opposed to merely removing ill health (Seligman et al., 2010).

Under the umbrella of positive health, there are some interesting research innovations happening too. For example, based on the content of tweets alone, it has been shown that positive emotions can predict longevity (Eichstaedt et al., 2015). Similarly, a recent meta-analysis has shown that positive interventions can reliably increase optimism (Malouff & Schutte, 2017), which in turn is associated with numerous desirable health outcomes. Many cutting-edge studies showing constructs studied by positive psychology are not merely happy neon signs but carry important implications towards living a connected and meaningful life. I hope that science remains the backbone and defining feature of positive psychology because this research almost always has implications for the wellbeing of humanity. Judging by the pace and quality of research produced in the past 15 years, I am confident that increasingly sophisticated questions and methods will keep enriching and expanding the field.

MEJPP: It has escaped no one's attention that many positive psychology interventions are being prescribed by non-psychology practitioners across the world including the MENA/GCC region. What does it mean for the field and those on the receiving end of such interventions?

TR: I am indeed aware of the widespread practice of positive psychology interventions by non-positive psychology practitioners. Based on my time in the MENA/GCC region, I see that it is no exception there either. It is everywhere. However, in fields like ours, the practice almost always runs miles ahead of the available evidence producing a number of paraprofessionals who are fascinated with the topics and understandably so. Happiness, life satisfaction, well-being, positivity, character strengths, meaning and purpose are vastly interesting. But, this same fascination has been too well capitalized upon and become an industry rather than a science with an overabundance of certifications, workshops, retreats, courses, executive level masters programs and other trainings producing an army of people ready to sell whatever solutions people are ready to buy.

It is very difficult for any positive psychology organization to monitor or police credentials, experience and competence-based practice. Nonetheless, as president of the clinical division, I am part of a committee that is preparing recommendations and guidelines towards the ethical practice of positive psychology interventions. I hope this will benefit especially the recipients of these positive psychology interventions and recommend they ensure that the credentials, training, and experience of the practitioner are adequate so as not to be negatively impacted.

MEJPP: You are also the Founder and Project Leader of the Flourish Initiative at the University of Toronto (Canada), where you work at developing the character strengths of university students. Tell us about the initiative.

TR: I have had the great privilege and pleasure of spearheading "Flourish" at the University of Toronto Scarborough (UTSC). The purpose of the Flourish project is to support student well-being and resilience by systematically identifying and building their academic skills and character strengths. I was able to foster a collaboration between the Academic Advising and Career Centre, Athletics and Recreation, Accessibility Services, and the Registrar's office through which to specially target incoming first year students and support their mental health. We also applied for what is called here in Ontario, the Mental Health Innovation Fund (MHIF) grant, and partnered



with the local school board and a nearby hospital to devise and deliver a Strengths-Based Resilience (SBR) program to students in high schools as well as the UTSC who were experiencing symptoms of mental illness. To date, 2557 UTSC students have completed the comprehensive online Flourish assessment and received interactive feedback about their strengths. We have also promoted a strengths-based approach towards mental health to decrease stigma and increase service accessibility, particularly among students from diverse cultural backgrounds. In addition to this, we trained 133 educators and mental health professionals in a three day comprehensive SBR training event. Some of these professionals worked directly with more than 200 UTSC students, grade ten students, and adolescent patients at an outpatient clinic in running these SBR group interventions. Our initial results show that participants completing these groups report an increase in resilience and well-being as well as a decrease in stress and stigma. The program is available to all and readers can learn more here: www.strengthsbasedresilience.com. Judging from the number of inquiries received from other post-secondary institutes in Canada and around the world, both Flourish and the SBR program are a popular resource and our initiatives have been replicated in several universities. Readers can learn more here: <http://www.utsc.utoronto.ca/flourish/>

MEJPP: Are there cultural and religious areas of inquiry that are currently being overlooked by researchers in the field? If you were to offer positive psychology researchers direction as to what topics of interest are worth investigating, what would you say?

TR: Evidence shows that positive emotions and character strengths connect us in ways no other process can. I would suggest that the cross-cultural appeal and application of positive psychology is both underexplored and vastly underutilized, as every culture has strengths that are perhaps unknown to other cultures and even to those in it. I work with culturally diverse clinical populations, many of which are from the MENA/GCC region and I have never found a client whose culture didn't value kindness, compassion, gratitude, optimism or creativity. Modes of expression may vary, but the essence of positive psychology constructs remains universally appreciated and desirable. In an ever increasingly polarized and divisive world, I believe that a positive psychology approach, as compared to deficit-based psychology, offers us much greater leverage to connect across barriers to create human habitats of gratitude, compassion, kindness and love. These concepts are also part of almost every religion. Therefore, we have the opportunity to put them in practice, based on evidence--- and why don't we?

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